

CLIFFSIDE REHABILITATION AND RESIDENTIAL HEALTH CARE CENTER

TITLE: EMERGENCY DISASTER PLAN: PANDEMIC EMERGENCY PLAN
EFFECTIVE: 9/1/2020

POLICY

Cliffside Rehabilitation and Residential Health Care Center is prepared to protect our residents, staff and visitors from contagious disease by formulating the above captioned policy to be implemented in the event of pandemic declaration. Pandemic outbreak of viral illnesses to include but not limited SARS, Ebola, Zika, Influenza and Covid-19 Virus. The facility will utilize the CMS (Center for Medicaid/Medicare Services), NYSDOH (New York State Department of Health) and CDC (Center for Disease Control) guidelines for Long Term Care preparedness and incorporate same into this policy. This Policy is part of our Emergency Disaster Plan and will be reviewed annually and as needed for ongoing compliance.

PROCEDURE

1) Notification

The following procedures should be utilized in the event of a Pandemic Viral or Influenza outbreak:

- Inform all employees verbally, phone calls, e-mails and through posting a memorandum near the time clock and info will be posted on all nursing units, as well as inform all Department Heads when a virus is increasing and sustaining human-to-human spread in the United States, and cases are occurring in the facility's area and state which are declared "prevalent" by the Commission of Health.
- Notify the Administrator and Director of Nursing if they are not on the premises. Activate the Staffing Roster for staffing needs if warranted as per our directives in the Disaster Plan.
- Facility Management staff should report to the Incident Command Post for briefing and instruction on Infection Control Procedures.
- Activate the Incident Command System (ICS) to manage the Infection Control incident. The most qualified staff member (in regard to the Incident Command System) on duty at the time assumes the Incident Commander position.
- Guidelines of this Pandemic Emergency Plan will be implemented and followed by all staff and will incorporate all requirements relative to Infection Control by CDC, CMS and NYSDOH Guidelines

- Residents, employees, contract employees, and visitors will be evaluated daily/Q shift for symptoms. Employees should be instructed to self-report symptoms and exposure.
- All Management staff will follow Pandemic Emergency Plan in regards to managing high-risk employees and for guidelines as to when infected employees can return to work in accordance with CDC and NYSDOH Guidelines
- Adherence to infection prevention and control policies and procedure is critical. Signs will be posted in all areas of the Facility for Infection Control Directives, Cough Etiquette, Hand Hygiene as well as any additional IC/IP information needed. Adherence to Droplet precautions during the care of a resident with symptoms or a confirmed case of pandemic virus is a must.
- Management will determine when to restrict Admissions and visitations. Same will be communicated to the involved staff, and Family members as well as all involved Consultants and Vendors. Signage and Posters will be placed at the Front Door as well as throughout the Facility for awareness of any Restrictions and Directives
- The Medical Director, local and state health departments will be contacted as needed to discuss the availability of vaccines and antiviral medications, as well as any recommendations for treatments.
- The Administrator will ensure adequate supplies of PPE, Food, Water, and Medical supplies are available to sustain the facility if Pandemic virus occurs at the facility and interrupts normal deliveries.
- Residents and employees will be cohorted as necessary to prevent transmission, as well as designated units for affected Residents.
- The Administrator and DNS will implement contingency staffing plans as needed.
- Residents and employees will be screened daily and Q shift to identify exposure to Pandemic novel virus.
- Viral Testing will be done in conjunction with MD directives and DOH/CDC requirements
- All staff members will be trained on the facility Pandemic Management Plan and related policies and procedures for Infection Control and transmission precautions as part of Disaster Planning, and staff awareness. Same will be on Orientation, as well as if outbreak is suspected or as identified by CDC, CMS or NYSDOH
- Staff will be educated on Infection Control Plan following CDC Guidelines as well as education on signs/symptoms of the diseases and care protocols which will be incorporated into our Management Plans.
- Education and Communication will also be sent to Family members and significant others regarding our Management Plans and new directives for care; as well as notification of change regarding their loved one.

2) Education and Training

- The *Infection Control Coordinator* (ADNS Assistant Director of Nursing) is responsible for coordinating education and training on seasonal and Pandemic Viruses. NYSDOH, CMS and hospital-sponsored resources are researched, as well as usage of web-based training programs. The website www.cdc.gov is considered as a resource and the Facility will download applicable information for education
- Education and training of staff members regarding infection prevention and control precautions, standard and droplet precautions, as well as respiratory hygiene/cough etiquette should be ongoing to prevent the spread of infections, but particularly at the first point of contact with a potentially infected person with seasonal/pandemic virus. Facility will follow NYSDOH and CDC Guidelines.
- Education and training should include the usage of language and reading-level appropriate, informational materials, such as brochures, posters, as well as relevant policies. Such materials should be developed or obtained from www.cdc.gov.
- Informational materials should be disseminated during before and during seasonal/pandemic outbreaks, and as conditions change

3) Pandemic Virus Management Plan /Surveillance and Detection

- The *Pandemic Virus Response Coordinator* (Administrator) will be responsible for monitoring public health advisories (federal and state) and updating the Pandemic Virus Committee, particularly when pandemic virus has been reported and is nearing the specific geographic location. www.cdc.gov will be utilized daily as a resource and recommendations will be followed in conjunction with CMS and DOH requirements.
- A protocol has been developed specifically to monitor the seasonal influenza-like illnesses in residents and staff during the influenza season, as well as any other Viral illness outbreak which tracks illness in residents and staff.
- The Admission policy includes that residents admitted during periods of seasonal influenza should be assessed for symptoms of seasonal influenza, and receive a flu vaccine.
- A system will be implemented to daily monitor residents and staff for symptoms of seasonal influenza, as well as confirmed cases of influenza and other viral illnesses that have been emergent.
- Information from the monitoring systems is utilized to implement prevention interventions, such as isolation precautions or cohorting as well as notification procedures

4) Infection Prevention and Control

- The Facility will develop a plan for hospitalization and readmission of residents to the facility for management of the pandemic infectious disease.
- Our plan will comply with all applicable State and federal laws and regulations, including but not limited to 10 NYCRR, 415.19, 415.3 and 415.26, as well as 42 CFR 483.15.

- Infection prevention and control policies will require staff to use contact and droplet Precautions (i.e., gowns, mask and (eye shield as suggested) for close contact with symptomatic residents). Respiratory hygiene/cough etiquette, and Hand Hygiene will be practiced at all times by all staff
- Cleaning and disinfection for transmission prevention during pandemic virus follows the general principles used daily in health care settings (1:10 solution of bleach in water), or other EPA approved sanitizers.

The IP shall develop procedures to cohort symptomatic residents or groups using one of more of the following strategies:

Signage will be placed at Entry to Floors to Identify Designated Units and Precautions Being Implemented

- Confining symptomatic residents and their exposed roommates to their room.
- There will be no sharing of bathrooms by residents outside of the cohorted areas
- Privacy Curtains will be kept closed
- Closing units where symptomatic and asymptomatic residents reside, i.e., restricting all residents to a specific unit, for management and surveillance of symptoms.
- Develop criteria for closing units or placing the entire facility on lockdown to new admissions during pandemic viral or influenza outbreak.
- Residents will be informed of Infection Control procedures and necessity
- Staff will ensure Visitor Restrictions are enforced per policy daily
- The Medical Director and Director of Nursing will develop clinical care policies for treatment of ill residents and those under suspicion. All Nursing staff will be educated on the Clinical Care Protocols which will be outlines in the Pandemic Management Plan
- the Infection Control Coordinator (ADNS) will maintain a daily line list per unit of all residents with positive or suspect viral illness. Same will include all needed information for reporting to NYSDOH and other Federal Agencies as mandated.

4) PPE USAGE and Storage

In conjunction with our Disaster Plan, the facility will ensure a 60 day supply and storage of all needed PPE in accordance with CDC, including but not limited to:

- * N95 respirators
- * Face shield,
- * Eye protection
- * Gowns/isolation gowns,
- * Gloves,
- * Face masks
- * Hand Sanitizer
- * Sanitizer and disinfectants in accordance with current EPA Guidance.
 - The Infection Control Coordinator will identify need in accordance with affected residents and ensure availability of PPE in designated areas
 - PPE use will be monitored for appropriate use and appropriate Infection control interventions to prevent disease transmission
 - The DOH will be notified of any surge in identified infections and concerns regarding availability of PPE, needs of Residents and staff use will be anticipated and evaluated throughout the Pandemic.

5) Preparedness of Supplies and Surge Capacity including PPE

- A member of the QA Committee has been assigned to assess the need and availability of all PPE during a Pandemic. The Administrator and /or the DNS will ensure that all needed supplies are available and kept in a secure location.
- A predetermined amount of supplies are stored at the facility or satellite location, and the Pandemic Coordinator will be responsible for ensuring availability.
- Housekeeping will be responsible for ensuring Hand Hygiene equipment is available daily throughout the Facility.
- Housekeeping will be responsible for disinfection of units in conjunction with all Infection Prevention Policies, including terminal cleaning of rooms where positive residents were transferred or expired.
- Plans for Surge Capacity will include strategies to help increase hospital bed capacity in the community.
- Agreements have been established with area hospitals for admission to the facility of patients to facilitate utilization of acute care resources for more seriously ill patients.
- Facility space has been identified that could be adapted for use as expanded inpatient beds and information has been provided to local DOH for implementation and awareness.
- Capacity and need will be determined for deceased residents as needed, including a space to serve as a temporary morgue.

6) FAMILY/SIGNIFICANT OTHER COMMUNICATION

- Family members and responsible parties are notified prior to an outbreak that visitations may be restricted during an outbreak to protect the safety of their loved ones.
- The Communication Plan will designate a staff member on each unit i.e. Charge Nurse update authorized family members and guardians of residents infected with the pandemic infectious disease at **least once per day** and upon a change in the resident's condition; this information will be documented in the EMR for validation and/or on a Notification Log
- Communication will be given to all residents and authorized family members and guardians once per week on the number of infections and deaths at the facility via email, paper copy, or telephone.
- Our plan will provide all residents with daily access to free remote videoconferencing, or similar communication methods, with authorized family members and guardians; and by electronic means or other method selected by each family member or guardian. The Recreation staff or Social Work staff will be assigned accordingly to facilitate.

7) Facility Communications with Public Health and Other Agencies

The Pandemic Influenza Response Coordinator is responsible for communications with the public health authorities during a declared pandemic outbreak.

*Local Health Department contact information:

- **Metropolitan Area Regional Office (NYSDOH)**
Long Term Care Division
90 Church St, New York, NY 10007
(212) 417-4200
- **Long Island Metropolitan Regional Office (NYSDOH)**
Long Term Care
Phone: (631) 851-3609
Fax: (631) 851-4324
- **New York State Health Department (NYSDOH)**
New York State Department of Health
175 Green St, Albany, NY 12202
(518) 447-4580

8) Quality Assurance Committee

The Facility has developed a Special Review Infection Control and Prevention QA Committee to implement our Disaster Plan when a Pandemic is expected or declared. Members of the Committee will be responsible for the coordinating and implementing the Disaster Plan. The following Departments will be named to the Disaster Plan QA Committee:

Medical Director
Administrator
Director of Nursing (DNS)
Infection Control/Staff Education Coordinator (ADNS)
Director of Housekeeping
Director of Maintenance
Nursing Supervisor(s)
Rehabilitation Director
Director of Respiratory
Social Service Director
Director of Recreational Therapy
Dietary Director
Director of Purchasing